PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10684713

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE (OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			7	7		= /	. 1	RATE	FEE	7	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	 	OR	BASIC FEE		
TOTAL CHARGEABLE CLAIMS			minus 20=		* 0			X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS			7 minus 3 =		* 0			X43=		OR	X86=		
MU	ILTIPLE DEPE	NDENT CLAIM P	RESENT					+145=		OR	+290=		
* If	the difference	less than ze	ero, enter	"0" in c	column 2	L	TOTAL		OR	TOTAL	770		
CLAIMS AS AMENDED - PART II								OTHER THAN SMALL ENTITY OR SMALL ENTITY					
_		(Column 1)	1	(Colun		(Column 3)	1 -	SMALL		OR	SMALL		
AMENDMENT A		REMAINING AFTER AMENDMENT		NUME PREVIC PAID I	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	Independent	*	Minus	***	CLAIM	=		X43=		OR	X86=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+145=		OR	+290=		
								TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE		
(Column 1) (Column 2) (Column 3)													
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHI NUME PREVIO PAID F	BER BUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
	independent	*	Minus	***	<u> </u>	=		X43=		OR	X86=		
.	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						¹	+145=		OR	+290=		
							Al	TOTAL DDIT. FEE		OR ,	TOTAL ADDIT. FEE		
7		ı			_								
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT	·	HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		= .		X\$ 9=		OR	X\$18=		
	Ind pendent	*	Minus	***	01.4114	=		X43=		OR	X86=		
	rino i Priese	NTATION OF MU	LITE DEP	ENDENT	CLAIM			+145=		OR	+290=		
**	* If the ntry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."								·	OR A	TOTAL DDIT. FEE		
		ber Previously Paid					r foun	d in the app	ropriate box	in colu	ımn 1.		